GRANCARE NURSING & REHABILITATION CENTER

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517 EAST DIVISION STREET

FOND DU LAC Ownership: Corporati on 54935 Phone: (920) 921-6800 Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/01): 75 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/01): 75 Title 19 (Medicaid) Certified? No Number of Residents on 12/31/01: 32 35 Average Daily Census:

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	1/01)	Length of Stay (12/31/01)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	37. 5
Supp. Home Care-Personal Care	No					1 - 4 Years	<b>56</b> . 3
Supp. Home Care-Household Services	No	Developmental Disabilities	0. 0	Under 65	3. 1	More Than 4 Years	6. 3
Day Services	No	Mental Illness (Org./Psy)	34. 4	65 - 74	0. 0		
Respite Care	Yes	Mental Illness (Other)	12. 5	75 - 84	34.4		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0. 0	85 - 94	53. 1	**********	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegi c	0.0	95 & 0ver	9.4	Full-Time Equivalen	t
Congregate Meals	Yes	Cancer	3. 1	İ	ĺ	Nursing Staff per 100 Res	si dents
Home Delivered Meals	No	Fractures	9. 4		100.0	(12/31/01)	
Other Meals	No	Cardi ovascul ar	6. 3	65 & 0ver	96. 9		
Transportation	Yes	Cerebrovascul ar	18. 8			RNs	12. 4
Referral Service	No	Di abetes	6.3	Sex	% j	LPNs	17. 4
Other Services	Yes	Respi ratory	0.0		Ì	Nursi ng Assi stants,	
Provi de Day Programming for		Other Medical Conditions	9. 4	Male	34.4	Aides, & Orderlies	45. 5
Mentally Ill	No			Femal e	65.6		
Provi de Day Programming for			100.0		j		
Developmentally Disabled	No				100. 0		
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## Method of Reimbursement

		Medicare litle 18			dicaid tle 19	_		0ther			Pri vate Pay	;		amily Care			anaged Care			
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Diem (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of Al l
Int. Skilled Care	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0
Skilled Care	2	100.0	304	0	0.0	0	0	0.0	0	1	3. 3	128	0	0.0	0	0	0.0	0	3	9. 4
Intermediate				0	0.0	0	0	0.0	0	3	10.0	128	0	0.0	0	0	0.0	0	3	9. 4
Limited Care				0	0.0	0	0	0.0	0	16	53. 3	128	0	0.0	0	0	0.0	0	16	<b>50.</b> 0
Personal Care				0	0.0	0	0	0.0	0	6	20. 0	90	0	0.0	0	0	0.0	0	6	18. 8
Residential Care				0	0.0	0	0	0.0	0	4	13. 3	90	0	0.0	0	0	0.0	0	4	12. 5
Dev. Di sabl ed				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	t 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		0	0.0		0	0.0		30	100.0		0	0.0		0	0.0		32	100.0

County: Fond Du Lac GRANCARE NURSING & REHABILITATION CENTER

Admissions, Discharges, and   Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01										
beachs builing kepoteting terrou				(	% Needi ng		Total					
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of					
Private Home/No Home Health	4.8	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents					
Private Home/With Home Health	9. 5	Bathi ng	0.0		84. 4	15. 6	32					
Other Nursing Homes	2.4	Dressi ng	<b>25.</b> 0		62. 5	12. 5	32					
Acute Care Hospitals	77.4	Transferri ng	31. 3		<b>59. 4</b>	9. 4	32					
Psych. HospMR/DD Facilities	1. 2	Toilet Use	28. 1		50. 0	21. 9	32					
Reĥabilitation Hospitals	0.0	Eati ng	59. 4		34. 4	6. 3	32					
Other Locations	4.8	**************	******	*****	******	*******	******					
Total Number of Admissions	84	Conti nence		%	Special Treatmen	nts	%					
Percent Discharges To:		Indwelling Or Externa	ıl Catheter	3. 1	Receiving Resp	pi ratory Care	6. 3					
Private Home/No Home Health	11. 2	Occ/Freq. Incontinent	of Bladder	62. 5	Receiving Trad	cheostomy Care	0. 0					
Private Home/With Home Health	25.8	Occ/Freq. Incontinent	of Bowel	21.9	Recei vi ng Suct	ti oni ng	0. 0					
Other Nursing Homes	14. 6	<del>-</del>			Receiving Osto	omy Care	0. 0					
Acute Care Hospitals	18. 0	Mobility			Receiving Tube	e Feedi ng	0. 0					
Psych. HospMR/DD Facilities	1. 1	Physically Restrained	l	0. 0	Receiving Mecl	hanically Altered Diets	s 28. 1					
Rehabilitation Hospitals	0.0					•						
Other Locations	11. 2	Skin Care			Other Resident	Characteri sti cs						
Deaths	18. 0	With Pressure Sores		3. 1	Have Advance 1	Di recti ves	87. 5					
Total Number of Discharges		With Rashes		0.0	Medi cati ons							
(Including Deaths)	89	ĺ			Receiving Psyc	choactive Drugs	71. 9					

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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	Ownershi p:			Si ze:		ensure:					
	Thi s	This Proprietary Facility Peer Group		50	- 99	Ski	lled	Al	l		
	Facility			Peer	Group	Peer Group		Facilities			
	%	%	Ratio	%	Rati o	%	Ratio	%	Rati o		
Occupancy Rate: Average Daily Census/Licensed Beds	46. 7	82. 5	0. 57	86. 4	0. 54	85. 8	0. 54	84. 6	0. 55		
Current Residents from In-County	84. 4	74. 3	1. 14	69. 6	1. 21	69. 4	1. 22	77. 0	1. 10		
Admissions from In-County, Still Residing	14. 3	19.8	0. 72	19. 9	0. 72	23. 1	0. 62	20. 8	0. 69		
Admissions/Average Daily Census	240. 0	148. 2	1. 62	133. 4	1. 80	105. 6	2. 27	128. 9	1. 86		
Discharges/Average Daily Census	254. 3	146. 6	1. 73	132. 0	1. 93	105. 0	2. 40	130. 0	1. 96		
Discharges To Private Residence/Average Daily Census	94. 3	58. 2	1. 62	49. 7	1. 90	38. 5	2. 45	52. 8	1. 79		
Residents Receiving Skilled Care	9. 4	92. 6	0. 10	90. 0	0. 10	89. 9	0. 10	85. 3	0. 11		
Residents Aged 65 and Older	96. 9	95. 1	1. 02	94. 7	1. 02	93. 3	1. 04	87. 5	1. 11		
8					0. 00		0.00				
Title 19 (Medicaid) Funded Residents	0. 0	66. 0	0.00	68. 8		69. 9		68. 7	0.00		
Private Pay Funded Residents	93. 8	22. 2	4. 23	23. 6	3. 97	22. 2	4. 22	22. 0	4. 26		
Developmentally Disabled Residents	0. 0	0.8	0. 00	1. 0	0.00	0. 8	0.00	7. 6	0. 00		
Mentally Ill Residents	46. 9	31. 4	1. 49	36. 3	1. 29	38. 5	1. 22	33. 8	1. 39		
General Medical Service Residents	9. 4	23.8	0. 39	21. 1	0. 44	21. 2	0. 44	19. 4	0. 48		
Impaired ADL (Mean)	43. 1	46. 9	0. 92	47. 1	0. 92	46. 4	0. 93	49. 3	0. 88		
Psychological Problems	71. 9	47. 2	1. 52	49. 5	1. 45	<b>52.</b> 6	1. 37	51. 9	1. 39		
Nursi ng Care Requi red (Mean)	4. 7	6. 7	0. 70	6. 7	0. 70	7.4	0. 63	7. 3	0.64		